

August 28, 2007

RECEIVED

AUG 29 2007

DUCHESNE COUNTY CORPORATION

Tax Roll Master Record

Please file
SD130014

2:56:30PM

Parcel: 00-0032-7070 Serial #: DEER MDWS-0005

Entry: 394568

Name: HACKFORD TEDDY

c/o Name:

Address 1: 103E GREENFIELD

Address 2:

City State Zip: HEBER CITY

UT 84032-0000

Property Address:

Acres: 40.78

Status: Active

Year: 2008

District: 050 SUBDIVISION 2

0.000000

Owners	Interest	Entry	Comment
HACKFORD TEDDY		394568	(A0502/0812)
HACKFORD SKYE		394568	(A0502/0812)

Property Information	2008 Values & Taxes				2007 Values & Taxes		
	Units/Acres	Market	Taxable	Taxes	Market	Taxable	Taxes
LF02 LAND REC UNIMPROVED	40.78	16,312	16,310	197.76	16,312	16,310	197.76
Totals:	40.78	16,312	16,310	197.76	16,312	16,310	197.76

2008 Taxes:	197.76	2007 Taxes:	197.76
Special Taxes:	0.00		
Penalty:	0.00		
Abatements: (0.00)		
Payments: (0.00)		
Amount Due:	197.76		

NO BACK TAXES

Back Tax Summary							
Year	Principal	Specials Total	Penalty	Interest Due	Interest Rate	Total Payments	Total Due
2000	0.00	0.00	0.00	0.00	12.00%	413.86	0.00
Totals:	0.00	0.00	0.00	0.00		413.86	0.00

Legal Description

SEC 32 T3S R7W USM, LOT 5 OF DEER MEADOWS SUBDIVISION 40.78 ACRES

History

NEW CARD FROM 3577 & 35788 4-9-99.

Paul:

Another surface mining operation in Duchesne County F.Y.I.
 They have a backhoe on site to excavate and load rock.
 We will require a conditional use permit. Let me know
 if DOGM will require a permit. Perhaps we can find
 this site Thursday while you are out to look at the Aposthian
 site?

Mike Hyde



DUCHESNE COUNTY BUSINESS LICENSE APPLICATION

Business Licensing Clerk, PO Box 910, 734 North Center, Duchesne, UT 84021

Phone: 435-738-1120 Fax: 435-738-5522

(Dates to be covered by license are from the date of approval to December 31 of current year.)

Prior to applying for a license you must submit and have approved a Duchesne County Business License Zone Clearance.
A copy of the approved Duchesne County Business License Zone Clearance must be attached to this application

Copies of all applicable licenses and proof of insurance must be attached to this application (i.e.: daycare, kennel, contractor, Food Handler Permit, vehicle insurance, liability insurance, etc.)

Conditional Use Only

Date Rec'd: _____
Zone Clearance Attached: ☒
Fee Assessed: _____
Receipt No: _____
License No: _____

BUSINESS INFORMATION - Please print all information!

Describe Business: *Pick Desert Stone up Palatize and Haul to Rock yard*

Other names business has been known by:

Business Name (DBA): *Hackford Rock* Phone: *671-0237(435)* Cell: *935-671-2978*

Business Physical Address: *Lot 5 Deer Meadows Sams Wash* Zip: _____

Number of employees, including self: *1*
Part-time: _____ Full-time: _____

Business Mailing Address: *130 East Greenfield Heber UT 84032* Phone: *935-671-2978*

Business Property Owner: *Shye & Ted Hackford*

Property Owner's Approval: *YES*

Phone: *935-671-2978*

Property Tax Serial #: *Deer MDWS-0005*

Section: *32*

Township: _____

Range: _____

Applicable licenses Attached?: (i.e. contractor, daycare, kennel, food handler, etc.) ☒ Yes ☐ No If "NO", explain: *N/A*

For Transportation Business: Proof of Vehicle/Equipment insurance attached?: ☒ Yes ☐ No If "NO", explain: _____

For Recreation Business: Proof of Liability insurance attached?: ☒ Yes ☐ No If "NO", explain: _____

Home-based business only: Your business classifies as home-based only if all business activity including manufacture, storage, sales, etc. take place solely within the confines of your home. (Note that an Internet business is not classified as a home-based business.) Under these conditions, do you declare your business as home-based? ☐ Yes ☒ No If you checked yes, please enter your Gross Annual Receipts: _____

APPLICANT INFORMATION - Please print all information!

Name of Applicant or Legal Agent (Person): *Shye Hackford / Teddy Hackford*

Applicant's Mailing Address: *130 East Greenfield Heber UT 84032*

Phone: *435-671-0237*

Cell: *671-2978(435)*

Fax: *801-487-9822*

Email: *ts-horsetraining@yahoo.com*

Applicant must supply one form of certifiable identification: Soc. Security # *546-35-7414* OR Valid Utah Drivers License #: _____

Type of Organization: Entity #: _____

☒ Self-owned ☐ Corporation ☐ Limited Liability Company ☐ Partnership

State Sales Tax #: _____

Federal #: _____

Professional License #: _____

Names of Firm or Partnership members:

N/A

I hereby make application for a business license within the corporate limits of Duchesne County, Utah, and outside the limits of incorporated cities and towns, and Chapter 5 of the "Duchesne County Code" for the type of business listed.

A license shall not be issued, nor shall any business activity occur where a business fails to comply with any state or local laws or regulations as administered by the following county offices: Business Licensing Department, Planning & Zoning Department, Building Inspection, Health, Sheriff, Fire Marshal, and Duchesne County Commission; nor shall a license be issued when, due to failure to comply, the business is disapproved by one of the said offices. A license shall not be issued to any applicant who has been convicted of a felony. If the license or license renewal is disapproved and not issued, the fee shall be returned to the applicant.

Any application for a business license or license renewal shall constitute an irrevocable consent of the owner and their agent(s) for such entry and inspection at reasonable times, until the license is disapproved, expired or revoked.

As the business owner or responsible agent, I hereby certify that the information submitted in this application is accurate and I agree to abide by the terms and conditions of any business license issued as a result of said information. I understand that this application must be approved and a valid Duchesne County Business License issued before business activities may commence at this location.

I hereby certify that I have not been convicted of a felony within the last five (5) years.

Shye Hackford
Applicant's Signature

Teddy Hackford
Applicant's Signature

8-27-07
Date

ACTION ON BUSINESS LICENSE APPLICATION

☐ Approved

☐ Disapproved

By: _____

Business License Clerk

Date: _____

Comments/Conditions/Reasons for Approval or Disapproval:

Conditional use permit required.
MAH

Appeals must be made to the Licensing Department (County Commission) within 45 days from date of disapproval.

BUSINESS NAME: HACKFORD ROCKAPPLICANT NAME Shive and Teddy Hackford

DUCHESNE COUNTY BUSINESS LICENSE ZONE CLEARANCE

Business Licensing Clerk, PO Box 910, 734 North Center, Duchesne, UT 84021.

Phone: (435)-738-1120; Fax: (435)-738-5522

APPLICANT: PLEASE PRINT & COMPLETE ALL BLANKS INSIDE THIS BOX

Date of Application 8-27-07 Property Tax Serial # Deer Meadows-0005
Applicant's Name Teddy + Shive Hackford Phone 671-2818 (435) Cell 671-025743 Fax
Applicant's Mailing Address 130 East Greenfield City Heber State Utah Zip 84032
Physical Address of Proposed Business: Deer Meadows-0005 Lot #5 Deer Meadows Sams Wash
Mailing Address of Proposed Business: 130 E. Greenfield Heber UT. 84032
Name of Property Owner: Shive + Teddy Hackford
Property Owner Physical/Mailing Address: 130 E. Greenfield Heber UT. 84032
List type of business and describe all business activities (future activities not listed may not be allowed):
gathering west desert stone, palatizing Rock and Hauling to
Goal-to make enough money so land pays its own. payment
Is this activity a new use for this location? yes If yes, what was its previous use? Nothing

Is property owned by applicant or leased? owned
Will business activity be conducted within a structure? NO Type of structure: _____
Will there be outdoor storage or activity associated with the business? yes If yes, explain: Storage of desert stone
until palatized and Hauled
If using an accessory building on a lot with a dwelling, Sq. Ft. of structure: _____ Are structure(s) currently existing? Yes or (No)
If the activity is a restaurant, what is the total seating capacity? _____
Visiting clientele? NO Frequency and amount: _____
Is there adequate off-street parking for your use? N/A How many spaces? N/A
Are there existing signs on the premises of your business? NO Signage plans? NO

Amount, type and size of vehicle(s) to be used including trailer(s): Dodge 350 flatbed pickup - 25ft flatbed goose
neck trailer.

For Home-based business only: Will there be exterior display or storage of goods on the premises? If yes, explain: _____

For Home-Based business only: Other than those related by blood, marriage or adoption, will more than five people be employed on the premises? _____

Applicants Certification: I certify that the information stated in this box is true and accurate. Should a Preliminary Business License Zone Clearance be issued, I understand that any permit for a building, business license or use issued on the basis of this clearance authorizes only the use, arrangement and construction set forth hereon and only in accordance with applicable State and County regulations. I also understand that this is not a business license and that I cannot begin operation of the business until an approved business license is issued.

Applicant's Signature: Shive Hackford Teddy Hackford

For an approved business license you must submit this approved application, license application and fee to our office (6 working days to process).

REVIEW

Planning & Zoning Department

STATUS: * DeniedCOMMENTS: Surface Mining requires a Conditional Use
permit from the Planning Commission.

ZONING OFFICIAL: _____

BUILDING INSPECTION: _____

DATE: _____

DATE: _____

*DECISION MAY BE APPEALED TO THE DUCHESNE COUNTY COMMISSION WITHIN 45 DAYS WHICH TIME RUNS FROM THE DATE OF THIS DECISION.